

**STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
BUREAU OF REGULATORY SERVICES**

In re: Todd Zgorski, N.H.A.

Petition No. 2000-1205-036-002

CONSENT ORDER

WHEREAS, Todd Zgorski of Cobalt, Connecticut (hereinafter "respondent") has been issued license number 001508 to practice as a nursing home administrator by the Department of Public Health (hereinafter "the Department") pursuant to Chapter 368v of the General Statutes of Connecticut, as amended; and,

WHEREAS, the Department alleges that:

1. Respondent was the administrator of Cobalt Lodge Health and Rehabilitation Center during the time period of December 1, 1999 through April 30, 2000.
2. During the aforesaid period, respondent hired nurse aides without verifying that they were registered in the state nurse aide registry, and failed to provide training and documentation of training of said nurse aides during said period, all in violation of section 19a-13-D8t(f) of the Regulations of Connecticut State Agencies.
3. The above described facts constitute grounds for disciplinary action pursuant to the General Statutes of Connecticut, §19a-517(b), including, but not limited to:
 - a. §19a-517(b)(3); and/or
 - b. §19a-517(b)(4).

WHEREAS, respondent, in consideration of this Consent Order has chosen not to contest the above allegations of wrongdoing but, while admitting no guilt or wrongdoing or violation of any statute or regulation, agrees that for purposes of this or any future proceedings before the Department of Public Health (hereinafter "the Department"), this Consent Order shall have the

Page 2 of 4

same effect as if proven and ordered after a full hearing held pursuant to §19a-14 of the General Statutes of Connecticut.

NOW THEREFORE, pursuant to §19a-14 and 19a-17 of the General Statutes of Connecticut, respondent hereby stipulates and agrees to the following:

1. Respondent waives his right to a hearing on the merits of this matter.
2. Respondent's license number 001508 to practice as a nursing home administrator in the State of Connecticut is hereby reprimanded.
3. Respondent shall pay a civil penalty of one thousand five hundred dollars (\$1500.00) by certified or cashier's check payable to "Treasurer, State of Connecticut." The check shall reference the Petition Number on the face of the check, and shall be payable at the time respondent submits the executed Consent Order to the Department.
4. Respondent shall comply with all state and federal statutes and regulations applicable to his licensure.
5. Respondent shall pay all costs necessary to comply with this Consent Order.
6. Legal notice shall be sufficient if sent to respondent's last known address of record reported to the Licensure and Registration Section of the Division of Health Systems Regulation of the Department.
7. This Consent Order is effective on the first day of the month immediately following the date this Consent Order is accepted and ordered by the Department.
8. Respondent agrees that this Consent Order shall be deemed a public document, and the Department's allegations as contained in this Consent Order shall be deemed true in any subsequent proceeding before the Department in which his compliance with this Consent Order or with §19a-517 of the General Statutes of Connecticut, as amended, is at issue.
9. This Consent Order and terms set forth herein are not subject to reconsideration, collateral attack or judicial review under any form or in any forum. Further, this Order is not subject


Page 3 of 4

to appeal or review under the provisions of Chapters 54 or 368a of the General Statutes of Connecticut, provided that this stipulation shall not deprive respondent of any rights that he may have under the laws of the State of Connecticut or of the United States.

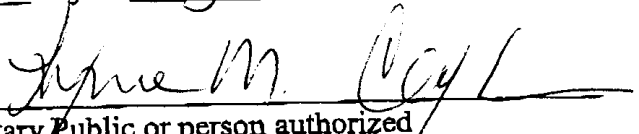
10. This Consent Order is a revocable offer of settlement which may be modified by mutual agreement or withdrawn by the Department at any time prior to its being executed by the last signatory.
11. Respondent has the right to consult with an attorney prior to signing this document.

Page 4 of 4

I, Todd Zgorski, have read the above Consent Order, and I stipulate and agree to the terms as set forth therein. I further declare the execution of this Consent Order to be my free act and deed.


Todd Zgorski

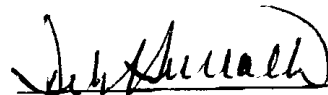
Subscribed and sworn to before me this 15th day of August 2001.


Notary Public or person authorized
by law to administer an oath or affirmation

My Commission Expires 5/31/03

The above Consent Order having been presented to the duly appointed agent of the
Commissioner of the Department of Public Health on the 27th day of

August 2001, it is hereby accepted.


Debra J. Turcotte, Director
Division of Health Systems Regulation

dmt/zgorsky
consent